

Exhibit H

Instructions for TB Treatment and Prevention

INSTRUCTIONS FOR TB TREATMENT AND PREVENTION

☒ Because your tuberculin skin test indicates that you have germs in your body that cause tuberculosis (TB), a special medicine called INH (Isoniazid) has been prescribed for you. If taken regularly and long enough INH will greatly reduce the chances that you will develop TB.

☐ Tests show that you have/may have tuberculosis (TB). To be cured you must take medications for several months and have regular examinations. If taken regularly and long enough these medications will cure TB. The medications for your treatment will be issued free by your local health department.

As with all medicine some side effects may occur. If you develop any of the signs or symptoms listed below, STOP taking the medicine and contact RN at the or TALLAPOOSA County Health Department immediately.

SIGNS AND SYMPTOMS

- | | |
|---|---------------------------------|
| 1. Dark colored urine (coffee or tea colored) | 6. Dizziness |
| 2. Yellow skin or eyes | 7. Loss of appetite |
| 3. Rash or itching | 8. Always feeling tired |
| 4. Nausea | 9. Unexplained high fever |
| 5. Headache | 10. Blurred vision |
| | 11. Pain in joints (hands/feet) |

REMEMBER

1. TAKE THE MEDICATION EVERY DAY AS DIRECTED.
2. KEEP YOUR NEXT APPOINTMENT
3. CALL THE CLINIC IF YOU CANNOT KEEP YOUR APPOINTMENT.
4. DON'T RUN OUT OF MEDICATION DURING TREATMENT.
5. IF YOU HAVE ANY QUESTIONS ABOUT YOUR TREATMENT CONTACT THE CLINIC NURSE PROMPTLY.

☒ I have received a copy of this instruction sheet and have talked to a member of the health department staff about these recommendations and side effects. I agree to take the medication as prescribed by the health department TB physician for as long as prescribed. **THE ALABAMA DEPARTMENT OF PUBLIC HEALTH HAS THE LEGAL RESPONSIBILITY TO INSURE THAT YOU COMPLETE YOUR THERAPY. IF YOU DO NOT THE HEALTH DEPARTMENT IS REQUIRED BY LAW TO TAKE LEGAL ACTION TO INSURE THAT YOU DO COMPLETE THE TREATMENT.**

☒ I agree to take the INH pills for preventive therapy as prescribed by the health department physician.

☐ I have elected **NOT** to take INH pills for preventive therapy and hereby release the county health department of all responsibility concerning this matter.

✓ Jesse Pearson
Signature of Patient or (Parent/Guardian)

5/11/04
Date

Awley
Public Health Worker.

825-9203
Telephone Number

8-5 M-F
Hours

Exhibit I

Prescription for Jessie W. Pearson

Tallapoosa County Health Department
Dadeville, Alabama Date _____
Name Jessie Pearson Age 51 Sex M
Address _____ Weight _____

Rx INH PER PROTOCOL FOR 6 MONTHS THEN CLOSE TO PRN.
VITAMIN B6 25mgs. DAILY PRN

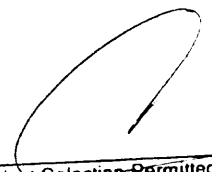
 M.D. _____ M.D.
Product Selection Permitted Dispense as Written
Refill 5 Times ACSC _____ DEA _____

Exhibit J

Affidavit of Jason Cowart

**IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA
EASTERN DIVISION**

JESSIE W. PEARSON,)	
)	
Plaintiff,)	
)	
v.)	Civil Action No. 3:05-CV-418-T
)	
DAVID MCNAIR, et al.,)	
)	
Defendants.)	

AFFIDAVIT OF JASON COWART

STATE OF ALABAMA)
)
COUNTY OF TALLAPOOSA)

BEFORE ME, the undersigned authority and Notary Public in and for said County and State at large, personally appeared Jason Cowart, who being known to me and being by me first duly sworn duly sworn on oath deposes and says as follows:

1. My name is Jason Cowart. I am over the age of nineteen and competent to make this affidavit. I am employed by the Tallapoosa County, Alabama, Sheriff's Department. I have been so employed for three years. I have completed an eighty-hour jail management course and a forty-hour jail supervision course. I have achieved the rank of Sergeant.

2. I am familiar with the Plaintiff due to his incarceration in the Tallapoosa County Detention Facility; however, I am not personally familiar with the allegations made the basis of the Plaintiff's Complaint, as he never made any such complaints known to me.

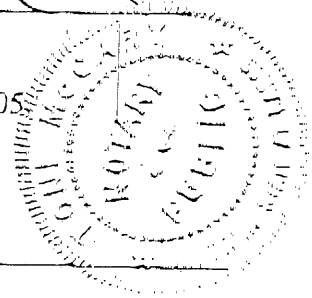
3. I state affirmatively that I neither acted, nor caused anyone to act, in such a manner as to deprive the Plaintiff of any right to which he was entitled.

4. I swear to the best of my present knowledge, information, and belief that the above statements are true; that I am competent to make this affidavit; and, the above statements are made by drawing from my personal knowledge of the situation.


JASON COWART

SWORN TO and SUBSCRIBED before me this 20 day of June, 2005


NOTARY PUBLIC
My Commission Expires: _____



MY COMMISSION EXPIRES APRIL 5, 2009

Exhibit K

Inmate Request Forms dated April 10,
2004, September 14, 2004, October 12,
2004, and Undated Form

TALLAPOOSA COUNTY JAIL

INMATE REQUEST FORM

(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PEARSON ID# _____ CELL # _____ DATE: _____

BRIEFLY OUTLINE YOUR REQUEST

I would like to know when I go to court, AM, How Much is my bond, And will I be gone to court in Alex City.

REQUEST DIRECTED TO: (CHECK ONE)

☒ CORRECTIONAL OFFICER☐ JAIL ADMINISTRATOR☐ SHIFT SUPERVISOR☐ CHIEF DEPUTY

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Your bond is \$13,500 and you will go to court in Alex City. We will not know your court date until the day before you go to court or when you bond out you will be assigned a court date.

C. Blodgett
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL

INMATE REQUEST FORM

(ONLY ONE REQUEST PER FORM)

NAME:

JESSIE FARRIN

ID#

1

CELL #

26

DATE:

4-10-04

BRIEFLY OUTLINE YOUR REQUEST

CAN YOU GIVE ME TO A MOUT, I NEED TO PAY FOR MY D.O.I BOND, AND THE PURGE FOR THE RESRTHITION, GIVE ME THE TOTAL AMOUNT I NEED TO GET OUT

REQUEST DIRECTED TO: (CHECK ONE)

() CORRECTIONAL OFFICER

() JAIL ADMINISTRATOR

() SHIFT SUPERVISOR

() CHIEF DEPUTY

Jessie Farrin
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Your total bond and purge for all charges is \$24455.43. YOUR BOND IS 20,000 and you have a total purge of \$1455.43

C. Howell
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JERRY F. LEARN ID# _____ CELL# 7 DATE: 9-14-04

BRIEFLY OUTLINE YOUR REQUEST:

I have \$3500.00 dollars to pay on my
DRUGS, AND \$500 To pay on my bond,
IF YOU CAN DO ANYTHING TO HELP GET
ME OUT, THIS WEEK MY BROTHER HAS
LOAN ME THE MONEY, I HAVE BEEN IN
JAIL FOR SIX MO, I WOULD LIKE BE RELEASE
TO FIND WORK, AND HELP MY MOTHER OUT

Jerry F. Learn
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Already checked - must pay the
entire porgt amount first

9/14/04
(DATE)

[Signature]
(OFFICERS SIGNATURE)

TCJ Form -04

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PEARSON ID# 11111 CELL# DATE: 10-12-04

BRIEFLY OUTLINE YOUR REQUEST:

Can you check on my bond, i was
told that i could bond out until i was
sentenced, i am to return to court in Dec, 18
04 - 4 sentences on probation. Judge Bryan
left my bond as it was so that i could
bond out, on contact my lawyer Lydia
Waters 256-329-8493. She can help she was
in court with me.

Jessie Pearson
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

You have been sentenced to 5 years
there is NO bond

10-12-04

(DATE)

[Signature]
(OFFICERS SIGNATURE)

TCJ Form -04

Exhibit L
Tallapoosa County Jail Inmate
Handbook

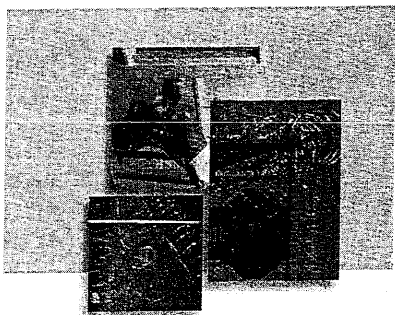
**HANDBOOK
ON**

**INMATE RULES AND
REGULATIONS**

TALLAPOOSA COUNTY JAIL
DADEVILLE, ALABAMA

A Division Of
The Tallapoosa County Sheriff's Office

JIMMY ABBETT, SHERIFF



DAVID McMICHAEL, JAIL ADMINISTRATOR

REVISED 8/01/2002

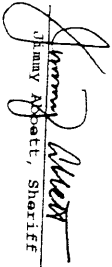
SECTION 1.0**FOREWORD**


The Tallapoosa County Jail is operated by the County Sheriff. Living in an institution requires certain rules and regulations, as does any situation where groups of people live closely together. You will be expected to obey these rules and regulations and to perform satisfactorily any duty or assignment made by Officers and Staff. Be certain to obey the orders or instructions of Officers even though they may differ from previous orders or instructions. Follow the most recent order given to you and avoid argument with Officers, Staff and other inmates.

Every effort will be made on the part of the Jail Staff to ensure safe custody, decent living conditions and fair treatment of all inmates. The Staff of the Tallapoosa County Jail recognizes that each inmate has the right to freedom of fear of inhumane treatment or abuse by any person. Inmates may address any concerns by filling out an Inmate Request Form. Your access to privileges in this facility is directly related to your behavior while in this facility.

Tallapoosa County Jail Officers, like you, are also subject to rules and regulations which govern both conduct and performance of their responsibilities. They, like you, are subject to disciplinary action for substandard performance or dereliction of duty. They, like you, are entitled to respect for their position and freedom from abuse by anyone. You will find them respectful of you as individuals and of your rights, and of privileges. By the same token, they will demand the same of you. Any disregard toward the dignity of any Officer's person is detrimental to good order and discipline and can neither be tolerated nor justified. The Officers are your guarantee of safe and secure custody.

Your cooperation while incarcerated in this Facility is both expected and required.


Jimmy Abbott, Sheriff


David Kockichael, Jail Administrator

SECTION 2.0**INTRODUCTION TO INMATE RIGHTS and
GENERAL LIVING CONDITIONS**

The Jail Facility is managed and controlled by the Sheriff of Tallapoosa County through his Jail Administrator and his Staff. The Staff maintains security, decent living conditions and fair treatment for all inmates. No inmate has the right to assign work to you, or have any control or supervision over you.

While incarcerated in this facility, you will be given fair and humane treatment. You are required to obey the law and the rules of this jail. If you damage public property, break the law, or rules of the Jail while you are incarcerated, you may be charged criminally and prosecuted, and/or disciplined appropriately.

Disciplinary action will be applied fairly to assist in the protection of health, safety, and security of all persons with this Detention Facility.

An inmate has certain rights within our facility, but with every right comes responsibility. You have the right to expect, as a human being, to be treated with respect, impartiality, and fairness by all personnel. You have the responsibility to treat others, both employees and inmates, in the same manner.

You have the right to be informed of Jail rules, procedures and operation schedules. You have the RESPONSIBILITY to know and abide by them. Correctional Officers in this facility should make every effort to ensure your rights. Every inmate must accept RESPONSIBILITY for his/her own actions.

Three meals will be served daily. There will not be a lapse of more than fourteen (14) hours between any two (2) meals. Inmates are not allowed to keep dinner trays and other eating utensils in their cells. This does not include spoons or cups issued/purchased from the Commissary.

Inmates do not have the right to have obscene photographs, pictures or literature in their possession. Revolutionary or inflammatory publications or materials of such nature will not be allowed in the jail.

Depending on weather conditions, staff availability, and security conditions, every effort will be made to insure that every inmate, who so desires, is placed outside in the exercise yard for at least one hour. This will be done Monday through Friday. When being moved to the exercise yard, you are to move quietly in a single file and not disturb the other cells. This will result in suspension of the daily exercise.

There are no inmate unions or organizations in this facility. There are no "Inmate Courts" or "Kangaroo Courts" and no inmate in confinement with you has been given any authority whatsoever over your situation. Any attempt by an inmate or group of inmates to impose fines or punishment will be a violation of the established rules and regulations and will receive maximum disciplinary sanctions.

The following rules and regulations state what is expected of you and what the Corrections Officers can do for you while you are incarcerated. You are encouraged to read and understand the rules. If you do not understand the rules, ask an officer to explain them to you.

SECTION 3.0

INMATE RESPONSIBILITIES

A. Personal Cleanliness / Laundry- It is important that you practice good hygiene and personal appearance. Bathing facilities should be provided to you daily. For health and security reasons, excessively long hair is not allowed and crew type haircuts will be provided if you are incarcerated over a period longer than one week or seven (7) days. You are required to keep facilities clean and in good working order. Necessities for personal hygiene (at time of admission) and care of living quarters should be furnished. Inspections will be held to insure compliance with cleanliness

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standards. Keeping living quarters clean is your responsibility and has a direct effect on privileges granted. Your clothing and linen will be laundered each week on a schedule established by the jail administration. You are NOT allowed to wash clothing or linen in sinks or showers of the jail or to hang such articles about the cells or dayrooms to dry.

B. Detention Facility Property- Upon admission to this facility, you will be requested to sign a "PROPERTY AND PERSONAL USE ITEMS ISSUED" report verifying the conditions of bedding, towels, uniforms and other articles assigned to you which are the property of the jail. You must return them in good condition when you leave. Property assigned to you cannot be transferred to another inmate. You will be required to PAY for any damage to the property or equipment of the Tallapoosa County Jail PRIOR TO BEING RELEASED. You will also be subject to criminal prosecution.

C. Care of Living Quarters- All inmates are required to keep the quarters in which they live clean and share in cleaning your cellblock. No trash or loose papers are to be left on the floor nor pictures or paper of any kind stuck to the wall at any time. All showers, toilets, and lavatories will be kept in a sanitary condition at all times. Lights are turned on at 5:00 AM and you should begin cleaning no later than 5:30 AM (prior to breakfast). Your beds are to be made up with all linen, uniforms and clothing neatly folded. At the beginning of each day, your cell will be inspected by a Jail Staff member prior to privileges (TV, Telephone, etc.) being given to you.

D. Conduct- Gambling, fighting and tobacco use are prohibited. You must obey all Jail Facility rules and follow the Correctional Officers instructions. You must be out of bed and have them made during the hours of 5:30 AM to 5:00 PM. You must conduct yourself in an orderly manner with respect for the rights of staff and

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other inmates. If you fail to conduct yourself properly, you may lose privileges, which are permitted to inmates in good standing, even to the point of disciplinary segregation. You are prohibited from controlling or attempting to control the actions or behavior of staff or other inmates by threat, promise, fear, force, or any other means. You cannot ridicule, tease, harass or molest staff or any other inmate.

SECTION 4.0

VIOLATIONS, PENALTIES, HEARINGS

A. Minor Violations:

1. Acting insulting or disrespectful toward personnel;
2. Lying or providing a false statement to staff;
3. Using abusive language;
4. Participating in unauthorized gathering;
5. Being in an unauthorized area, including another inmates cell;
6. Failure to follow safety or sanitation regulations;
7. Making, possessing, or using intoxicants;
8. Smoking;
9. Gambling;
10. Being unsanitary/untidy; failing to keep one's person or quarters clean;
11. Leaning property or anything of value for profit;
12. Malingering or feigning (faking) an illness;
13. Failure to be fully dressed when outside your cell or between the hours of 5:30 AM to 5:00 PM;
14. Wearing any material, in any way, on the head except for what is authorized from commissary purchases between the hours of 5:00 PM to 5:30 AM.
15. Touching fence or tampering with, in any way, the fence on the exercise yard;
16. Unnecessary noise such as arguing, shouting, whistling, rattling or pounding on doors,

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B. Major Violations

1. Repeated minor violations;
2. Possessing unauthorized clothing;
3. Burning paper or other material for any reason;
4. Possessing any items not on the approved list of items allowed to inmates (i.e. contraband such as money, cigarettes, lighters, matches, etc.);
5. Writing on the walls, furniture, or other minor damage to Jail Facility property of less than \$50.00;
6. Failure to comply with an officers lawful order;
7. Fighting or molesting;
8. Attempting to control other inmates, whether through coercion, force or threat;
9. Indecent exposure;
10. Refusing to provide a urine or breath sample upon request;
11. Giving or offering any official or staff member a bribe or anything of value;
12. Destroying, altering, or damaging Jail Facility property or property of another person;
13. Possessing unauthorized property belonging to another person or the county (stealing);
14. Tampering with or blocking any locking device;
15. Hoarding, selling, or transferring medication issued at the Jail or from any source;
16. Failing to stand count or interfering with count;
17. Violating promulgated rules or regulations;
18. Disrupting or abusing commissary, visitation, telephone, library, classes or recreational privileges;

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19. Disrupting or abusing religious, medical, food distribution or any other Jail facility activity or program;
20. Stoppage or placement of foreign objects or matter into toilets, showers, sinks or any other drains.

C. Serious Violations

1. Repeated major violations;
2. Murder;
3. Starting any fire may be considered arson and charged appropriately as specified in Title 13 of the Code of Alabama;
4. Possessing or introducing a gun or other weapon into the jail facility;
5. Rioting or encouraging others to riot;
6. Assault and battery on an inmate and/or personnel;
7. Practicing extortion or blackmail, demanding or receiving anything of value in return for protection against others to avoid bodily harm or under threat of informing;
8. Engaging in sexual acts;
9. Making sexual proposals or threats;
10. Possessing or introducing an explosive, or any object modified to be used as a weapon, chemical agent, or any type of ammunition into the Jail Facility;
11. Possessing, selling, using or introducing into the facility any narcotic, narcotic paraphernalia, drugs, or intoxicants not prescribed for the individual by authorized medical personnel;
12. Violating a condition of furlough, pass or any other conditional or temporary release (i.e. funeral, work, etc);
13. Leaving the Jail Facility without authorization;
14. Violating any Municipal, County, State or Federal Law;
15. Counterfeiting, forging or reproducing without proper authorization any document, article of identification, money, security items or official papers;
16. Acting in a way that disrupts or interferes with security or orderly running of the Jail

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D. Penalties for Violations

1. For minor violations the inmate may be verbally reprimanded, if it is the opinion of the Correctional Officer that the reprimand should prevent the infraction from happening again. Restriction of privileges may be imposed on an inmate for a period up to 48 hours (two days) for a minor violation.
 2. For major violations the inmate may be denied any or all privileges for a period of time not to exceed 240 hours or ten (10) days and/or be placed in disciplinary housing.
 3. For any serious violation the inmate may be denied any or all privileges for a period not to exceed 720 hours or thirty (30) days, will be placed in disciplinary housing, and receive criminal charges if applicable.
 4. In addition to any penalty, which may be assessed, the Jail Administrator may reconsider any Inmate Classification.
- Facility (i.e. failure to lockdown, not return razors at pickup);
17. Encouraging, facilitating, or otherwise conspiring with others to commit any prohibited act;
 18. Escaping, attempting to escape, or planning to escape, including failing to return from a approved community activity in a timely manner;
 19. Theft;
 20. Damaging Jail Facility property (in excess of \$50.00);
 21. Attempting to intimidate or actually intimidating or controlling personnel or other individuals whether through coercion, force, or threat; and
 22. Interfering with security operations or devices, fire drills, firearms, smoke detectors, blocking or jamming cell doors or cameras.

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E. Disciplinary Procedures

When Staff finds it necessary to charge an inmate with a minor, major or serious violation of the rules of conduct, he/she should comply with the following procedures:

1. Notification of Supervisor;
2. Prepare an "Incident Report" if major or serious violation and "Use of Force Report" if applicable.
3. Advise the inmate of the specific violation/charges.
4. Advise the inmate of his/her rights to a hearing;
5. If the inmate acknowledges he/she has committed the violation and waives the right to a hearing, the Jail Administrator will assess the penalty for the rule violation.
6. If the inmate denies he/she has committed the violation, the Jail Administrator will appoint a three (3) member hearing committee and set a hearing date after the inmate is notified of the charges.
7. The inmate has no right to counsel at the hearing unless the alleged violation is one for which the inmate could also be prosecuted.
8. Inmate has no right to cross-examine witnesses.
9. The inmate has the right to remain silent, but his/her silence may be used by the disciplinary committee against him/her in arriving at a decision.
10. The disciplinary committee shall make a decision without the inmate being present and shall provide a written finding of fact and recommended discipline to the Jail Administrator. The Jail Administrator will then provide the inmate with a written finding of fact and an assessment of discipline.
11. Inmates may appeal, to the Jail Administrator, the decision of the Disciplinary Hearing Committee, in writing within 48 hours of receiving a finding of fact, based upon the following:
 - A. Procedural errors
 - B. Submission of new evidence;

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F. Hearing/Review Rules of Conduct

All inmates must conduct themselves in an appropriate manner during the hearing. Rules of conduct must be adhered to during the hearing/review proceedings as follows:

- A. Full uniforms required, worn properly
- B. No head wear allowed.
- C. Reasonable, civilized behavior is expected;
- D. Using abusive language (profanity) is a violation of Jail rules; if you use abusive language at the hearing, you will be removed and the hearing continued in your absence and you may receive additional restriction of privileges for a period of up to five (5) days. If you attempt to intimidate or actually intimidate the Hearing Officer and/or witnesses, you will be removed and the hearing continued in your absence, and you may be denied any and all privileges for a period of thirty (30) days, placed in a disciplinary isolation cell and/or receive additional criminal charges.

- C. Insufficiency of a finding of evidence that proves the accused did not commit the prohibited act; and
- D. Prejudice or other appropriate grounds.

An Inmate accused of violating a serious or major infraction may be confined to a lock-down or disciplinary isolation cell pending the hearing, but not to exceed 24 hours unless on a weekend or holiday. If violations occur on a weekend or holiday, the inmate may be held until the next regular working day.

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SECTION 5.0

Inmate Privileges

A. Program Services

- Educational Classes is made available by the Tallapoosa County Board of Education for those inmates who have not graduated high school and are under the legal age or requirement to do so.
- GED Classes is offered on a voluntary basis. There are limitations on class size (10 per session) so it is done on a first come first serve basis. The approval for you to attend is also based on your behavior.
- Library use is a privilege available weekly to work on your current case pending. You should submit a request to the shift supervisor.
- Work Detail/Community Service is a privilege offered to inmates that have shown good behavior and meet the selection criteria to serve as an Inmate Worker. Inmates selected for Work Detail/Community Service shall be selected by the Jail Administrator with the recommendations from the jail staff and Correctional Officers.
- Inmate Workers shall be selected by the Jail Administrator with the recommendations from the jail staff and Correctional Officers. It is a privilege offered to inmates who meet the selection criteria. Inmate Workers must have and continue to display a positive attitude.
- Work Release Program. Inmates selected for approved work release must be first ordered by the presiding judge in your case. Once this order is issued it is your RESPONSIBILITY to notify your employer or locate an employer to hire you. The employer must then agree to certain conditions of the Tallapoosa County Jail Work Release Program contract.

B. Religious and other Services

Selected lay ministers have been approved to visit with each cell on a weekly basis. All qualified ministers of any faith may make arrangements to counsel any

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Inmate by having them contact the shift supervisor who will be on duty at the time of visit or by contacting the Jail Administrator.

C. Commissary

Inmates are allowed to purchase snacks, drinks, hygiene items etc. Commissary sheets are collected on MONDAY EVENINGS and every attempt will be made to issue Commissary on Wednesday's (except for weeks with holidays). Money must be in your account prior to 2:00 PM Monday. All sales are final and no refunds after you leave the store. Inspect your items at time of purchase. Any disorderly actions (talking, banging on windows, out of line, etc.) while being escorted to commissary will result in the loss of your privilege.

THE TALLAPOOSA COUNTY JAIL DOES NOT PROVIDE FREE HYGIENE ITEMS TO ALL INMATES. INMATES WHO ARE NOT CLASSIFIED INDIGENT* WILL BE EXPECTED TO PURCHASE HYGIENE ITEMS FROM THE COMMISSARY.

*INDIGENT-impovertished or lack of financial resources

Indigent Hygiene Pack Qualifications:

1. Inmate must not have more than \$2.00 in their commissary account and not have received commissary for the previous 30 days.
2. Inmate must be in indigent status to request qualification for Hygiene Pack (except new admissions).
3. Inmates wishing to request an Indigent Hygiene Pack will submit an "INMATE REQUEST FORM" to the Jail Administrator. The Administrative Assistant will determine if you qualify and authorize them to be issued. This pack will contain bath soap, and toothpaste only. Tooth brushes will be given out on a monthly basis.

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D. Laundry Change Out Schedule: (Subject to Change)

1. MONDAY-A & B Block clothing only
2. TUESDAY-C Block clothing only
3. WEDNESDAY-A & B Block linen only
4. THURSDAY-C Block linen only
5. FRIDAY-A & B Block clothing only
6. SATURDAY-C Block clothing only
7. SUNDAY-A,B,& C Block - Blankets

The items scheduled for washing must be ready for pick-up by 6:00 A.M. or they will not be washed. (Bagged and ready to be put out)

E. Phone Calls and Mail

PHONES-During the initial booking process, you will be allowed to call a person of your choice. This will be the only time you will be allowed to use a phone outside your cell. Each cell is equipped with a phone designed to make "COLLECT CALLS" only. This privilege will be made available to you between the hours of 8:00 AM and 9:00 PM.

FOR SECURITY PURPOSES, INMATE PHONES ARE RANDOMLY MONITORED AND/OR RECORDED. THIS IS THE ONLY NOTICE YOU WILL RECEIVE ON THIS ISSUE.

MAIL-All incoming and outgoing mail must include the inmate's name, and complete address. All return address must show a name (sender and receiver). No other writing or designs or figures shall be allowed and shall be returned to you or returned to sender. The following is a sample of your address:

Inmates Name #36524
Tallapoosa county Jail, Cell C2
316 Industrial Park Drive
Dadeville, Alabama 36853

Any material received in the mail, which advocates violence or disruption of the security of this facility, which encourages criminal or sexual behavior, or which advocates racial, religious or national hatred that could cause danger of violence in the jail will be confiscated. If there is any question regarding

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acceptability of materials, the Jail Administrator will make the final decision. It is your responsibility to notify your friends and family members of items not allowed to you by use/way of the mail. Items mailed to you that you are not authorized to have shall be confiscated and donated to a company or organization of our own choosing. IT WILL NOT BE PLACED INTO YOUR PROPERTY.

General correspondence (non-privileged) will be opened and examined by jail staff prior to delivery to the inmate. It will be scanned to determine if it contains any evidence of threat to public safety or threat to the security, order and safety of the jail facility.

Any rejected or confiscated mail will be forwarded to the Jail Administrator with a "MAIL CONFISCATION REPORT" stating why it was rejected. He will make the determination on what action will be taken. All outgoing mail must be given to the jail staff UNSEALED so it can be inspected for contraband or other unauthorized/illegal contents. Rejected outgoing mail will be returned to inmate.

Legal mail from the courts, clerks or attorneys is considered privileged and will be opened in your presence for inspection. Legal Mail will not be read by Correctional Officers. Out going may be sealed in the presence of a correctional officer after inspection.

Prisoner-to-Prisoner mail Because of legitimate penological interest, Prisoner-to-Prisoner (from any facility) mail is prohibited.

Prohibited Packages, newspapers, magazines or photos, which are suggestive or pornographic in nature, or promote violence or hatred, will be "returned to sender" as UNAUTHORIZED.

F. Reading Materials

You are authorized to keep issued educational books, two (2) soft back books at one time, and one religious book (no more than 5"x8", soft back only) in your cell. You will not be permitted to

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store excess amounts of papers or books that may cause a potential fire hazard. No more than five (5) personal letters, five (5) pictures and five (5) legal letters will be authorized in your custody. All others must be mailed out of the facility or destroyed. Only legal mail will be placed in your property.

G. Visitation

Non-public visitors (attorneys, court officials, ministers, etc.) may see inmates Monday-Friday from 8:00 AM to 11:00 AM, and from 1:30 PM to 4:30 PM. Non-public visitors may have special visits by contacting the shift supervisor on duty or the Jail Administrator. Public and any other Special Visit requests require direct approval from the Jail Administrator, Sheriff or Chief Deputy only.

1. Saturday and Sunday are designated as visitation day. Visitation days and time will be assigned to inmates according to his last name in alphabetical order and will last thirty (30) minutes. The time will remain the same during your stay at the jail. Saturday is for those last names that begin with "A" through "K" and Sunday are for those last names that begin with "L" through "Z". **IT IS YOUR RESPONSIBILITY TO NOTIFY YOUR VISITORS OF THE DAY AND TIME OF YOUR SCHEDULE AND WHAT IS REQUIRED OF THEM.**
2. Each inmate is allowed to submit five (5) names on their "VISITATION ROSTER" for visitation. All inmates serving more than forty-eight (48) hours and booked into the jail before 9:00 AM, on Thursday, will be allowed visitors on the upcoming weekend. These names will remain and no changes or additions can be made to your roster for ninety (90) days.
3. All visitors must be present at the same time and anyone 16 years of age or older MUST produce a photo identification, unless they are a dependant child in order to be registered for visitation. Dependant children will not be required to be listed on the roster or sign-in

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however, they must be accompanied by an adult that is registered.

4. Registration will begin fifteen minutes (15) minutes prior to scheduled visitation hours. Visits will be done only at the times set.
5. Inmates must be fully dressed before being moved to the visiting area. Vulgar language and/or gestures you may direct towards anyone during visitation periods are a violation of the rules and will result in disciplinary action. Loitering on the way to or from or failure to leave the visiting area when notified will also result in a disciplinary.
6. Visitation may be denied to any person if the visitor or inmate fails to comply with the visitation rules or when there is reason to believe the visit may not be in the best interest of the security and welfare of the jail.
7. Visitors must be appropriately dressed to attend visitation. The following attire is considered to be inappropriate, and your visitors will not be allowed to attend:

Sleeveless Shirts or Blouse
Shirts or Blouse that expose the waist line
Low cut Shirts or Blouse
Shorts of any kind
Screen Printed Shirts or Pants that depict the following:

Violence or Nudity	Vulgarity
Criminal Behavior	Racism

You should contact your family members that intend to visit you and make them aware of these rules.

H. Televisions

The viewing of televisions is a privilege that can be suspended, revoked for extended periods of time, or permanently removed from a cell. Any television that has been rendered unsafe, because of tampering, will be removed permanently.

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I. Games

Games (cards, checkers, chess, etc.) can be utilized between the hours of 6:00 AM through 10:00 PM. Provided privileges have been granted. They are subject to removal if the players or cell become too loud or rowdy. At a designated time all games will be removed from the cell. Failure to comply will result in disciplinary action and/or this privilege being suspended or revoked.

J. Inmate Workers

The Jail Administrator, upon recommendation of shift supervisors, will select certain inmates periodically to serve as "TRUSTEES" or "WORK DETAIL INMATES". The selection is based on the inmate's criminal charge, behavior while in jail and ability to adequately perform the designated task. Selection is done strictly by recommendation of the staff. Written requests will be discarded and constant verbal request will prevent your selection. In other words, don't ask.

1. Behavior not consistent with inmate rules or regulations, or bringing contraband into the facility, etc. will result in you being removed from this status.
2. All Inmate Workers shall eat in their cell at the designated feeding times.
3. Hall workers shall return to their cell when their work is completed. You will be called out on an as needed basis.
4. You shall remain in your assigned work areas only.
5. All workers who leave the confines of this facility will be completely searched upon their return.

K. Work Detail/Community Service Rules

If you are assigned to a work detail, the following rules must be followed if you are to remain on this assignment. Violations will result in immediate lockdown and possible criminal charges or rule violation charges brought against you.

1. Before you leave the jail facility for your work assignment you are to have your bunk made and all your personal and jail issued items arranged in a neat manner. You will also assist others in your cell to clean on a daily basis prior to leaving for your assignment.
2. You are to remain clean shaven and have a good appearance to remain on work detail.
3. You are to address all staff members and your detail supervisor as "Sir".
4. You must wear a complete uniform (jail shirt and pants) at all times while on work detail. No exceptions. You must wear or use all safety equipment issued to you for your work assignment.
5. You are not authorized to drive a vehicle or have keys to vehicles in your possession.
6. You are to remain on your assigned detail unless a supervisor changes your assignment. Inmates are not allowed to make substitutions or changes in assignments.
7. Alcoholic beverages and drugs are prohibited.
8. You are not to have visitors at your assigned job sites.
9. Do not make contact with any public officials in an attempt to get help on your case.
10. When you are returned to the jail at the end of your daily assignment, you are to immediately re-enter the jail. You are not authorized to enter any outside storage buildings; the outside worker will secure any of your property that can not enter the jail.
11. Nothing is to be brought back into the jail that was not issued to you by the jail. Don't ask. "I forgot" is not an excuse.
12. Telephone use prohibited outside the facility.

SECTION 6.0

Jail Operations

A. Personal Property

Inmates are not allowed to have valuable articles in their possession or transfer clothing or other property to other inmates. Property found in violation will be confiscated and forfeited. At the time of booking, all property taken from you should be listed on the "PROPERTY TAKE SHEET" which will require your signature. Excess property should be picked up by family or friends within 72 hours of booking. At the point of release, again you will be requested to sign your "PROPERTY RETURN SHEET" fully acknowledging the fact that you have received all items listed. Claims for lost property should be filed with the Jail Administrator immediately after release from this facility. (Weekends or holidays require a report on the next working day).

STATE INMATES-If you have been classified as a "STATE INMATE", it is your responsibility to contact your family or friends to remove any property you have in your cell or in your property that is not authorized by the Alabama Department of Corrections. (Authorization sheet has been provided to your cell). Any items not removed at the time you are to be transferred to the prison system within ninety (90) days after the inmate's release will be donated to an institution, company, or organization of our choosing.

B. Money

Friends and relatives may deposit money orders (no cash or checks accepted) in your inmate account. Your NID# must appear on all money orders next to your name. At the time of booking, you will have the opportunity to put any money in your possession in your account. This is the only time you will have that option. Once you have been booked in, money **CANNOT BE TRANSFERRED TO YOUR INMATE ACCOUNT**. Any money that is left by an inmate that has not been claimed within ninety (90) days after the

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Inmate's release will be deposited into the Tallapoosa County Jail Commissary Fund.

C. Escape and Contraband

Any inmate who escapes (includes walking off work detail), attempts to escape, assists another to escape or is responsible for bringing into the Jail Facility any weapon, saws, tools, narcotic drugs, alcohol, hallucinogenic substances, or any item not approved by the Jail Facility will be prosecuted as provided by law.

D. Grievance

All inmates are entitled to voice any grievance. Grievances cannot be filed as a group. Only the inmate with the grievance can file. A "GRIEVANCE FORM" can be requested from any correctional officer or Nurse. When completed (include your NID#) return it to the staff officer and you will receive a reply in a reasonable amount of time. You may appeal the decision or action in writing to the Jail Administrator of Tallapoosa County within seventy-two (72) hours of the return receipt. You may appeal this decision or action in writing to the Chief Deputy within Seventy two (72) hours of the return receipt. The final step of the appeal process will be to the Sheriff if written notice is given within seventy two (72) hours of receipt from the Chief Deputy.

E. Food

You will be served three (3) meals a day at regular intervals. The food will be wholesome and nutritional. Since food is expensive, you must not waste it. The menus meet recommended dietary allowances of "Local Health Code Standards". Any abuse of food, food trays, utensils or failure to return all trays and accessories (forks, cups, etc.) when requested by Jail Staff will result in disciplinary action taken against one or all inmates in that cell block.

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F. Medical Services

Reasonable and customary medical treatment is available to inmates. Limited dental treatment is also available. You should have an opportunity to report illnesses daily through the "INMATE REQUEST FORM" or by use of a Medical Request/Charge Sheet. Any inmate may refuse, in writing, health treatment and care; however, inmates must do so in the presence of health care staff.

Medical Charges to Inmates-

All inmates will be charged a co-payment fee for all self initiated non-emergency medical services. However, no inmate will ever be denied medical services because of their inability to pay. There will be no additional fee when a health care provider recommends an inmate's return for further treatment of the same complaint. All fees will be deducted from the inmates Commissary Account and forwarded to the Tallapoosa County Commission as reimbursement.

Inmates involved in an altercation that results in injury to another inmate or officer will be charged a medical fee for the injured inmate's or officer's medical treatment.

In the event an inmate has no funds or only partial funds in his/her account, the account will be placed into a negative balance. When the inmate later receives funds, the total remaining fees will be deducted from the inmates account.

Upon release from this facility, any unpaid medical fee balance will reflect a debit on the inmate's account for three (3) years from the date of release. If re-incarcerated during this time, that debt will be deducted from any future funds then deposited in that inmates account.

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CO-PAYMENT FEE SCHEDULE:

1. Emergency Room visits initiated by the inmate and are not preexisting-----\$15.00
2. Nurse visit (requested)-----\$ 5.00
3. Doctor visit (requested)-----\$15.00
4. Dentist Visit-----\$20.00
5. Prescription or prescribed medication-----\$ 5.00
6. Over the counter medication-----\$.25

G. Lock-downs

This facility maintains complete security lock-down of all inmates from 10:00 PM to 6:00 AM seven days per week and at other times as needed for special security reasons.

Besides the routine lock-downs at night, there are times when security/emergency situations dictate additional needs for inmate lock-downs. Therefore it is necessary that all inmates, at all times, immediately obey orders to lock-down.

Inmates of any cell block that refuses to lock-down immediately upon order to do so will cause that cell to go on 24 hour DISCIPLINARY LOCKDOWN, and loss of all inmate privileges for 24 hours.

H. Intercoms

Each cell is equipped with an intercom, which gives inmates direct communications with the Control Room for emergencies. Abuse of this device (i.e. time, when do I go to Court, weather, asking for specific officers, etc.) will result in cell loss of privileges.

I. Lights Out

Lights are turned out by the jail Staff at 10:00 P.M. This means that you are expected to be quiet so that everyone can sleep.

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J. Authorized Property

The property listed below is the only items allowed in cells:

ITEMS	MEN	WOMEN	WORK RELEASE
4 PAIR WHITE UNDERWEAR	YES	YES	YES
4 PAIR WHITE T-SHIRT	YES	YES	YES
4 PAIR WHITE SOCKS	YES	YES	YES
1 WEEDING BAND (NO STONE)	YES	YES	YES
1 WATCH (less than \$25.00)	YES	YES	YES
1 PLASTIC COMB	YES	YES	YES
1 BAR OF SOAP	YES	YES	YES
1 DEODORANT	YES	YES	YES
1 TOOTHBRUSH	YES	YES	YES
1 PAIR THERMAUS (WINTER)	YES	YES	YES
3 BRAS (NO UNDER WIRE)	NO	YES	NO
4 SETS WORK CLOTHES	NO	NO	YES
6 PAIR WHITE UNDERWEAR	NO	NO	YES
6 PAIR WHITE SOCKS	NO	NO	YES
6 WHITE TEE SHIRTS	NO	NO	YES
1 PAIR TENNIS SHOES/BOOTS	NO	NO	YES
ALL JAIL ISSUED ITEMS	YES	YES	YES
1 BIBLE	YES	YES	YES

K. Inmate Request

Inmate requests are required to be in writing on an "INMATE REQUEST FORM" which can be obtained from the medical cart daily. This form must be filled out completely (include NID#) and briefly outline your request. Supervisors will review all request and you will receive a reply to that request in a reasonable amount of time.

L. Alcohol/Drug Screen

Inmates that are participating in work details and inmate workers and/or the general population that has been allowed temporary release shall be tested for alcohol and drugs at random by use of a breathalyzer and urinalysis at the direction of the Jail Administrator. Alcohol/Drug Screen may be court ordered but is not necessary to promote discipline and the enforcement of rules.

M. Marriage

Inmates will not be allowed to be married while incarcerated at the Tallapoosa County Jail.

N. Promulgated Rules

It is impossible to write every rule pertaining to the operation of this facility and to include everything that is expected of you. From time to time, when needed, verbal directives will be given to you for short-term solutions. The Sheriff or Jail Administrator may promulgate additional rules, in writing, for long-term solutions and subsequently added to this manual when it is reprinted.


Exhibit M

Delta Dorm Rules

TALLAPOOSA COUNTY JAIL DELTA DORM RULES

While assigned to Delta Dorm the following rules must be followed if you are to remain in this housing unit. Violations will result in immediate lockdown and possible criminal charges or rule violation charges brought against you.

- Jul* 1. You are to have and display a positive attitude at all times.
- Jul* 2. You are to follow all directions and orders given by the staff members exactly and promptly. You are to address all staff members as "sir" or "maim".
- Jul* 3. Showers are to be used from 5am to 9am and from 4pm to 8pm daily.
- Jul* 4. You are to remain clean shaven and have a good appearance at all times.
- Jul* 5. Your bunk bed is to be made everyday no later than 7am. Personal effects and hygiene items are to remain clean and in a neat order.
- Jul* 6. You must wear a complete uniform during the hours of 9am to 7pm daily.
- Jul* 7. You will assist others daily to clean, beginning no later than 6am daily.
- Jul* 8. Quiet time begins at 10pm and TV and lights out at 11pm daily.

 4-17-03
David McMichael
Jail Administrator

JESSIE PEARSON
Inmate Printed Name


Inmate Signature

8-18-04
Date

Exhibit N

Jessie W. Pearson's Inmate Records
dated October 25, 2004, March 30, 2005,
and May 8, 2005

TALLAPOOSA COUNTY JAIL

INMATE REQUEST FORM (ONLY ONE REQUEST PER FORM)

NAME: JESSIE PEARSON ID# CELL# Dm DATE: 10-25-2004

BRIEFLY OUTLINE YOUR REQUEST:

My Name JESSIE PEARSON, I AM CURTAINING
ABOUT WORKING OUTSIDE IVE BEEN HERE 8
MONTHS IVE WORK OUTSIDE 3 TIMES SINCE IVE
BEEN HERE, I WORK AT THE F.O.B. Lodge, AND
AROUND THE JAIL, I WILL BE HERE UNTIL DEC,
IN 2004 I WOULD LIKE WORK OUTSIDE SOME DAYS,
IT IS POSSIBLE; Thank You

Jessie W Pearson
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Thank you for your request -
You will be requested.

10-25-04
(DATE)

[Signature]
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JESSE L PEARSON ID# CELL# 11 DATE: 3-30-05

BRIEFLY OUTLINE YOUR REQUEST:

Miss Moss can you find time
to talk to me in your office, if
it is about my time and what
I can do to go to work Release
or a Halfway House, or some kind
of program, that will let me pay
off my fine, and checks and do my time,

Jesse Pearson
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Mr Pearson all of that is up to the
Judge he's has to grant work Release

3-30-05
(DATE)

Moss
(OFFICERS SIGNATURE)

TCJ Form -04

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JESSIE TEARS ID# CELL# 46 DATE: 5-8-23

BRIEFLY OUTLINE YOUR REQUEST:

DEAR MR BLAKE THANK YOU FOR
TAKING TIME OUT OF YOUR BUSY
SCHEDULE, I HAVE MADE A REQUEST
FOR WORK OUTSIDE, I CAN WORK
ON LAWN MOWER AND LARDER
I WILL BE GOING TO COURT SOON
I WOULD LIKE TO BE A TRUSTEE

Jessie Tears
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE -- FOR REPLY ONLY

(DATE)

(OFFICERS SIGNATURE)

TCJ Form -04

Exhibit O
Inmate Request Forms/Remainder of Jail
File

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PEARSON ID# _____ CELL # 26 DATE: 4-20-06

BRIEFLY OUTLINE YOUR REQUEST

i Did not think my mother would come
but she decided to. i did not get her
on my visitor list i know it's 90 days
to change it. i would very much like
to see her now that we have talk
VERY TRULY YOUR

Jessie Pearson
(INMATES SIGNATURE)

REQUEST DIRECTED TO: (CHECK ONE)

() CORRECTIONAL OFFICER

() JAIL ADMINISTRATOR

☒ SHIFT SUPERVISOR

() CHIEF DEPUTY

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL

INMATE VISITORS LIST

PEARSON, Jessie
NAME (LAST) (FIRST)

C-6
CELL #

3-25-04
DATE

LIST A MAXIMUM OF FIVE NAMES OF FAMILY OR FRIENDS THAT YOU WOULD LIKE TO COME VISIT YOU.

6707168

#1 NAME: SAM PEARSON AGE: 54 RELATIONSHIP: BROTHER

ADDRESS: RT 7 Box 48 PHONE #: 234 2895

#2 NAME: STEVE PEARSON AGE: 46 RELATIONSHIP: BROTHER

ADDRESS: 115 BURN ST PHONE #: 234 9890

#3 NAME: EMMA PEARSON AGE: RELATIONSHIP: MOTHER

ADDRESS: PHONE #:

#4 NAME: AGE: RELATIONSHIP:

ADDRESS: PHONE #:

#5 NAME: AGE: RELATIONSHIP:

ADDRESS: PHONE #:

NOTE: THIS VISITORS LIST SHALL NOT BE CHANGED FOR 90 DAYS.

VISTATION DAY/TIME: SUN 9:00 AM

Jessie Pearson
(INMATE SIGNATURE)

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PEARSON ID# CELL # 06 DATE: 4-22-04

BRIEFLY OUTLINE YOUR REQUEST

I WOULD LIKE TO GO TO THE LAW
LIBRARY ANY TIME I WANT TO
CHECK ON MY CASE AND COURT
PROGRESS -

REQUEST DIRECTED TO: (CHECK ONE)

() CORRECTIONAL OFFICER

() JAIL ADMINISTRATOR

☒ SHIFT SUPERVISOR

() CHIEF DEPUTY

Jessie W Pearson
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Taken to library on 4/26/04

Shaddy
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL

INMATE REQUEST FORM

(ONLY ONE REQUEST PER FORM)

NAME: JESSIE L PEARSON ID# 43542 CELL # C6 DATE: 4-28-04

BRIEFLY OUTLINE YOUR REQUEST

IS THERE ANYONE I CAN TALK TO ABOUT
MY COURT DATE AND CHARGE, I HAVE
BEEN IN COUNTY JAIL OVER 1 MO, NOW
PLEASE LET ME KNOW,

Tentative Very Much

Jessie L Pearson
(INMATES SIGNATURE)

REQUEST DIRECTED TO: (CHECK ONE)

☐ CORRECTIONAL OFFICER

☐ JAIL ADMINISTRATOR

☐ SHIFT SUPERVISOR

☐ CHIEF DEPUTY

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

YOU'RE CHARGED w/ FELONY DUI & NUNIX 1B &
GIVING FALSE INFORMATION, NO INSURANCE, OPEN POSSESSION,
OBSTRUCTING POLICE, DRIVING SUSPENDED/REVOKED &
FTP. HAVE FAMILY CALL CLERK OFFICE OR TALK
TO YOUR LAWYER REGARDING COURT DATE

Sgt. Inazir
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: Jessie Barrow ID# _____ CELL # 6 DATE: 5-23-09

BRIEFLY OUTLINE YOUR REQUEST

I would like to go to the Law
Library

REQUEST DIRECTED TO: (CHECK ONE)

☐ CORRECTIONAL OFFICER

☐ JAIL ADMINISTRATOR

☐ SHIFT SUPERVISOR

☐ CHIEF DEPUTY

Jessie Barrow
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Refused 5-25-09

[Signature]
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL

INMATE REQUEST FORM

(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PEARSON ID# CELL # 16 DATE: 6-9-04

BRIEFLY OUTLINE YOUR REQUEST

LT Moss

JESSIE PEARSON AND JERMAINE
HUNTER. WOULD LIKE TO HAVE THE
OLD TESTAMENT BIBLE IN 16. WE HAVE
NEW TESTAMENT BOOKS AND WOULD LIKE SOME
THING UP IN THE OLD TESTAMENT. CAN YOU
SEND THEM AS SOON AS YOU CAN.

Jessie Pearson
(INMATES SIGNATURE)

REQUEST DIRECTED TO: (CHECK ONE)

() CORRECTIONAL OFFICER

() JAIL ADMINISTRATOR

☒ SHIFT SUPERVISOR

() CHIEF DEPUTY

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

I only have New Testament

lt. moss
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: Jessie Dawson ID# CELL # 66 DATE: 6-14-05

BRIEFLY OUTLINE YOUR REQUEST

Democracy Miss Adams
my account seem to be short back
week. This is how i account for it
from. 5-04 BAL \$500, 6-04 BAL \$1118
6-14-04 \$1025, my return has all
credit for the money.

REQUEST DIRECTED TO: (CHECK ONE)

☐ CORRECTIONAL OFFICER

☐ JAIL ADMINISTRATOR

☐ SHIFT SUPERVISOR

☐ CHIEF DEPUTY

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Mr. Dawson you had a Medical PC that
that was back. You said to say. You should
recieve a receipt from a officer.

RECEIVED

Mark
(OFFICERS SIGNATURE)



TALLAPOOSA COUNTY JAIL INMATE VISITORS LIST

Pearson Jessie B-4 B5 6-17-04
NAME (LAST) (FIRST) CELL # DATE

LIST A MAXIMUM OF FIVE NAMES OF FAMILY OR FRIENDS THAT YOU WOULD LIKE TO COME VISIT YOU.

#1 NAME: Emm Pearson AGE: 70 RELATIONSHIP: Mother

ADDRESS: 115 Birch St PHONE #: 243 9890
AK 6707168

#2 NAME: Sam Pearson AGE: 51 RELATIONSHIP: Brother

ADDRESS: Robison Rd PHONE #: 234 2795

#3 NAME: Steve Pearson AGE: 48 RELATIONSHIP: Brother

ADDRESS: 115 Birch St PHONE #: 234 9890

#4 NAME: Madame Fisher AGE: RELATIONSHIP: Uncle

ADDRESS: Alb City PHONE #:

#5 NAME: Alex Pearson AGE: 42 RELATIONSHIP: Cousin

ADDRESS: Robison Rd PHONE #:

NOTE: THIS VISITORS LIST SHALL NOT BE CHANGED FOR 90 DAYS.

VISTATION DAY/TIME: SUN 9:00 Jessie Pearson
(INMATE SIGNATURE)

TALLAPOOSA COUNTY JAIL

INMATE REQUEST FORM

(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PERSON ID# CELL # B4A DATE: 7-11-04
Time 3:00 PM

BRIEFLY OUTLINE YOUR REQUEST

To Shift SUPERVISOR I would like to
go To The Law Library Today "IF YOU
CAN I WANT TO LOCK IN TO MY CASE

Jessie Person
(INMATES SIGNATURE)

REQUEST DIRECTED TO: (CHECK ONE)

() CORRECTIONAL OFFICER

() JAIL ADMINISTRATOR

☒ SHIFT SUPERVISOR

() CHIEF DEPUTY

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Placed in Library

Loielody
(OFFICERS SIGNATURE)

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PERSON ID# _____ CELL# D DATE: 8-26-04

BRIEFLY OUTLINE YOUR REQUEST:

Miss McNamee; CAN YOU GET ME
AND A MOUNT OF MONEY I HAVE ARE
ON MY ACCOUNT SINCE I HAVE BEEN
HERE MARCH 20-04 - 8-04
THANK YOU VERY MUCH

Jessie Person
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Given inmate casing of Oct 8-26-04

(DATE)

Madame
(OFFICERS SIGNATURE)

TCJ Form -04

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: Jesse W. Pearson ID# _____ CELL# 15 DATE: 10-28-04

BRIEFLY OUTLINE YOUR REQUEST:

I would like to go to the Law
Library To look up my case

Jesse W. Pearson
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Went to library

10-30-04
(DATE)

D. Shaddy
(OFFICERS SIGNATURE)

TCJ Form -04

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: Jessie Pearson ID# _____ CELL# 6 DATE: 3-23-05

BRIEFLY OUTLINE YOUR REQUEST:

I NEED SOAP AND TOOTH PASTE, A INK PEN
AND SOME HAIR GEL, OR

Jessie Pearson
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Denial (money on cash account)

3-25-05

(DATE)

Shell

(OFFICERS SIGNATURE)

TCJ Form -04

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: Jessie P. Jones ID# _____ CELL# 66 DATE: 4-1-05

BRIEFLY OUTLINE YOUR REQUEST:

I NEED HYGIENE SOAP, Toothpaste,
toothbrushes

Jessie P. Jones
(INMATE'S SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

~~Denied~~ Denied (money on cash account)

4-01-05
(DATE)

Snell
(OFFICER'S SIGNATURE)

TCJ Form -04

TALLAPOOSA COUNTY JAIL
INMATE REQUEST FORM
(ONLY ONE REQUEST PER FORM)

NAME: JESSIE PIERCE ID# 43742 CELL# 06 DATE: 4-18-05

BRIEFLY OUTLINE YOUR REQUEST:

Miss Moss Can you get me a
bible, and see if I can be put
in the dorm, Thank you

Jessie W. Pierce
(INMATES SIGNATURE)

DO NOT WRITE BELOW THIS LINE - FOR REPLY ONLY

Bible Issued # 472780

4-21-05

(DATE)

LT. M. W.
(OFFICERS SIGNATURE)

TCJ Form -04

12/16/2004
10:21

Talapoosa County Sheriff's Department

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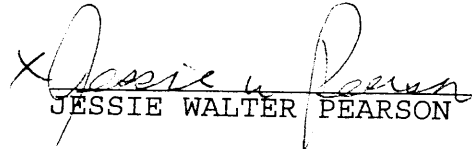
Check/Id Number: 4687
Date: 12/16/2004

Cash Account for: 43542

JESSIE WALTER PEARSON

Acct. Balance: \$0.00
Loc: - - - -

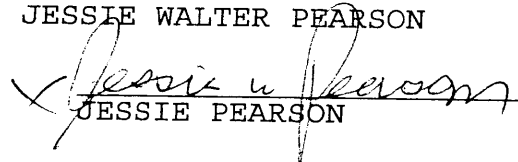
I, JESSIE WALTER PEARSON, hereby authorize the withdrawal of \$23.53 from my cash account, to be paid to JESSIE PEARSON by MADAMS


JESSIE WALTER PEARSON

I, MADAMS, certify that I have withdrawn \$23.53 from the cash account of JESSIE WALTER PEARSON and paid this amount to JESSIE PEARSON as authorized.

By: _____
MADAMS

I, JESSIE PEARSON, hereby certify that I have received \$23.53 withdrawn from the cash account of JESSIE WALTER PEARSON


JESSIE PEARSON

10/26/2004
10:11

Tallapoosa County Sheriff's Department

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1

Receipt Number: 65081
Date: 10/26/2004
Cash Account for: 43542
JESSIE WALTER PEARSON

Acct. Balance: \$0.89
Loc: TCJ -TCJ -C -C-4 -0018

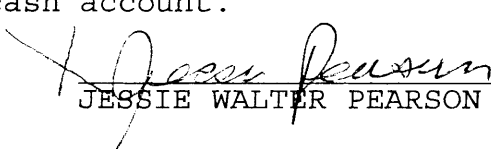
REFUND OF COFFEE

\$0.75

I, MADAMS, certify that on October 26, 2004, I made the previous adjustment to the cash account of JESSIE WALTER PEARSON

By: _____
MADAMS

I, JESSIE WALTER PEARSON, hereby acknowledge that I have been informed of the above adjustment to my cash account.


JESSIE WALTER PEARSON

05/31/2004
09:53

422
Page: 1

Check/Id Number: 4146
Date: 05/31/2004
Cash Account for: 43542
JESSIE WALTER PEARSON

Acct. Balance: \$5.23
Loc: TCJ -TCJ -C -C-6 -0006

I, JESSIE WALTER PEARSON, hereby authorize the withdrawl of \$5.25 from my cash account, to be paid to TALLAPOOSA COUNTY COMMISSION by MADAMS

On File
JESSIE WALTER PEARSON

I, MADAMS, certify that I have withdrawn \$5.25 from the cash account of JESSIE WALTER PEARSON and paid this amount to TALLAPOOSA COUNTY COMMISSION as authorized.

By: M Adams
MADAMS

I, TALLAPOOSA COUNTY COMMISSION, hereby certify that I have received \$5.25 withdrawn from the cash account of JESSIE WALTER PEARSON

Florine
TALLAPOOSA COUNTY COMMISSION